PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/591,746			ing Date 06/2006	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER TH.		
Н	FOR	l N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	T	RATE (\$)	FEE (\$)	
	BASIC FEE	-	N/A	LD NO	N/A		N/A	TEE (a)	1	N/A	TEE (0)	
┢	(37 CFR 1.16(a), (b), s SEARCH FEF	or (c))	NIA						1	<del></del>		
H	(37 CFR 1.16(k), (i), (ii)		N/A		N/A		N/A		ł	N/A		
TO	(37 CFR 1.16(o), (p), (		N/A		N/A		N/A		١	N/A		
(37	CFR 1.16(i)) DEPENDENT CLAIM	e	minus 20 =				x \$ =		OR	x s =		
(37	CFR 1.16(h))		minus 3 = *		•		x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 :	gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s).								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								]			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								]	TOTAL		
APPLICATION AS AMENDED – PART II           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR									OTHER THAN SMALL ENTITY			
AMENDMENT	10/07/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18(i))	• 12	Minus	<b></b> 20	= 0	1	x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 6	Minus	4	= 2	1	x \$ =		OR	X \$220=	440	
	Application Size Fee (37 CFR 1.16(s))											
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	440	
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus		=	1	x \$ =		OR	x \$ =		
	Independent (37 CFR 1,16(h))		Minus	***		]	x \$ =		OR	x \$ =		
ä	Application Size Fee (37 CFR 1.16(s))					]			]			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
									OR	TOTAL ADD'L FEE		
" If the entry in column 1 is less than the entry in column 2, write "o'in column 3.  " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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